Fill in this infor	rmation to identify your	case:		
Debtor 1	Kasra Behfar			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	WESTERN DISTRICT O	DF WASHINGTON	
Case number	19-10355			
(if known)				☐ Check if this is an amended filing
Official Fo	orm 106Sum			
Summary	of Your Assets	and Liabilities ar	nd Certain Statistical Information	12/15
Be as complete	and accurate as possib	le. If two married people	are filing together, both are equally responsible	for supplying correct

Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	320,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	45,200.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	365,200.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	352,069.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	18,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	155,929.69
	Your total liabilities	\$	525,998.69
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	8,939.86
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	12,357.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or
		hay and s	

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Summary of Your Assets and Liabilities and Certain Statistical Information Official Form 106Sum

page 1 of 2

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Best Case Bankruptcy

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____

One Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	18,000.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	18,000.00

	his information t							
Debtor '	1 Kas	ra Behfal lame		e Name	Last Name			
Debtor 2		idino	Middle	o ramo	Last Hame			
Spouse, if	f filing) First N	lame	Middle	e Name	Last Name			
Jnited S	States Bankruptcy	Court for	the: WESTERN	DISTR	ICT OF WASHINGTON			
Case nu	umber <u>19-103</u>	55						Check if this is a amended filing
Schon each ca	ts best. Be as com	B: Pr	operty escribe items. List	le. If two	only once. If an asset fits in more than married people are filing together, both his form. On the top of any additional par	are equally responsible for	or supply	ing correct
nswer e	every question.	•	·		Estate You Own or Have an Interest In			
□ No.	Go to Part 2.		uitable interest in a	any resid	ence, building, land, or similar property?			
□ No. ■ Yes	•	erty?	uitable interest in a		is the property? Check all that apply		nd claims	or exemptions. Put
□ No. ■ Yes	Go to Part 2.	erty?			is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secure the amount of any se Creditors Who Have	cured cla	ims on Schedule D:
No. ■ Yes 1.1 24 Stre	Go to Part 2. S. Where is the property of the	erty?		What	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secure the amount of any se	cured cla Claims S • Cu	ims on Schedule D: lecured by Property. urrent value of the ortion you own?
No. ✓ Yes 1.1 24 Stree	Go to Part 2. S. Where is the property of the	Circle , or other desc	eription	What	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one	Do not deduct secure the amount of any se Creditors Who Have Current value of the entire property? \$320,000.0 Describe the nature (such as fee simple a life estate), if known	cured cla Claims S Cu po O of your e, tenancy	urrent value of the ortion you own? \$320,000.00
□ No. ■ Yes .1 24 Stree Pa Ga City	Go to Part 2. S. Where is the property of the	Circle , or other desc	eription	What	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Do not deduct secure the amount of any se Creditors Who Have Current value of the entire property? \$320,000.0	cured cla Claims S Cu po O of your e, tenancy	urrent value of the ortion you own? \$320,000.00
No. Yes 1.1 24 Stree Pa Ga City	Go to Part 2. S. Where is the property of the	Circle , or other desc	eription	What	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Do not deduct secure the amount of any se Creditors Who Have Current value of the entire property? \$320,000.0 Describe the nature (such as fee simple a life estate), if know Fee Simple Check if this is (see instructions)	cured cla Claims S c Cu pc 00 of your tenancy wn.	urrent value of the ortion you own? \$320,000.00 ownership interest or by the entireties, o

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Debtor 1 K	Kasra Behfar		Case number (if known)	19-10355
3. Cars. vans.	, trucks, tractors, sport utility vel	hicles. motorcycles		
	, a. a.o., a. a.o. o, opo. a. a			
□ No				
Yes				
O.A. Malaa	Lexus	Who has an interest in the assumpt O	Do not deduct secu	ured claims or exemptions. Put
3.1 Make:	GS250	Who has an interest in the property? Check one	the amount of any	secured claims on Schedule D: ve Claims Secured by Property.
Model: Year:	2016	■ Debtor 1 only □ Debtor 2 only		
	mate mileage: 44000	Debtor 1 and Debtor 2 only	Current value of t entire property?	he Current value of the portion you own?
Other inf	formation:	☐ At least one of the debtors and another		
			\$25,000	.00 \$25,000.00
		☐ Check if this is community property (see instructions)	Ψ23,000	Ψ23,000.00
■ No □ Yes	ouo, nuioto, motore, personal nu	tercraft, fishing vessels, snowmobiles, motorcyc	3.0 4.00.0001100	
		n for all of your entries from Part 2, including that number here		\$25,000.00
Part 3: Descri	be Your Personal and Household Ite	ems		
·		erest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
				¢2 000 00
	Basic Housenoi	d Good and Furnishings		\$2,000.00
	Televisions and radios; audio, vide including cell phones, cameras, m		rinters, scanners; music co	ollections; electronic devices \$1,500.00
			<u> </u>	
	Antiques and figurines; paintings, other collections, memorabilia, col	prints, or other artwork; books, pictures, or othe lectibles	r art objects; stamp, coin,	or baseball card collections;
	Books, Pictures			\$500.00
	Doord, Florates			4000.00
Examples:	musical instruments	d other hobby equipment; bicycles, pool tables,	golf clubs, skis; canoes a	and kayaks; carpentry tools;

Official Form 106A/B Schedule A/B: Property page 2

Debtor 1	Kasra Behfa	r		Case number (if known)	19-10355
		Sports and Hobby Equipme	ent		\$200.00
■ No	mples: Pistols, rifles	, shotguns, ammunition, and relat	ed equipment		
☐ No	mples: Everyday clo	othes, furs, leather coats, designer	wear, shoes, accessories		
		Clothing			\$500.00
☐ No	<i>mples:</i> Everyday jev	velry, costume jewelry, engageme	nt rings, wedding rings, heirloom jev	welry, watches, gems, g	old, silver \$500.00
		Jeweny			
<i>Exai</i> □ No	farm animals mples: Dogs, cats, t	pirds, horses			
		Dog			\$200.00
■ No	-		ılready list, including any health a	ids you did not list	
		of all of your entries from Part 3 number here	, including any entries for pages y 	ou have attached	\$5,400.00
Part 4:	Describe Your Finance	cial Assets			
Do you	own or have any le	egal or equitable interest in any	of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	mples: Money you h	nave in your wallet, in your home,	in a safe deposit box, and on hand w	when you file your petition	on
				Cash	\$500.00
	institutions.	avings, or other financial accounts If you have multiple accounts with		edit unions, brokerage h	ouses, and other similar
■ Ye	S		Institution name:		
		17.1. Checking/Savings	Wells Fargo		\$300.00

Official Form 106A/B Schedule A/B: Property

page 3

Best Case Bankruptcy

Debtor 1	Kasra Behfar	•	Case number (if known) 1	9-10355
Exar		r publicly traded stocks nvestment accounts with b	rokerage firms, money market accounts	
■ No	S	Institution or issue	r name:	
joint	publicly traded sto venture	ck and interests in incorp	porated and unincorporated businesses, including an interest in	an LLC, partnership, and
■ No □ Yes	s. Give specific info	rmation about them		
	or consistence	Name of entity:	% of ownership:	
Nego	otiable instruments i	nclude personal checks, ca	otiable and non-negotiable instruments ishiers' checks, promissory notes, and money orders. cansfer to someone by signing or delivering them.	
	s. Give specific infor	mation about them Issuer name:		
	ement or pension a mples: Interests in IF		403(b), thrift savings accounts, or other pension or profit-sharing plan	ns
■ Yes	s. List each account	separately. Type of account:	Institution name:	
		Retirement	Federal Government	\$6,000.00
□ No	3	with landiords, prepaid rent	, public utilities (electric, gas, water), telecommunications companies. Institution name or individual:	of others
		Rent	Landlord	\$4,000.00
23. Annu No	ities (A contract for	a periodic payment of mon	ney to you, either for life or for a number of years)	
☐ Yes	s Iss	uer name and description.		
26 U.S		n IRA, in an account in a o 29A(b), and 529(b)(1).	qualified ABLE program, or under a qualified state tuition progra	m.
□ No ■ Yes	Ins	titution name and description	on. Separately file the records of any interests.11 U.S.C. § 521(c):	
	Fra	anklin Templeton		\$4,000.00
25 Truet	es aquitable or futi	ure interests in property (other than anything listed in line 1), and rights or powers exercis	sable for your benefit
■ No	•	rmation about them	other than anything listed in line 1), and rights of powers exercis	sable for your benefit
			and other intellectual property eds from royalties and licensing agreements	
■ No	•	rmation about them		
	·	nd other general intangib	les	
			pperative association holdings, liquor licenses, professional licenses	
☐ Yes	s. Give specific info	rmation about them		
Money o	r property owed to	you?		Current value of the portion you own?
	orm 106A/B		Schedule A/B: Property	page 4

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Best Case Bankruptcy

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De	btor 1	Kasra Behfar	Case number (if known)	19-10355
				Do not deduct secured claims or exemptions.
	Tax refu ■ No	ands owed to you		
	☐ Yes. 0	Give specific information about them, including whether you already filed the re	eturns and the tax years	
	■ No	support es: Past due or lump sum alimony, spousal support, child support, maintenan Sive specific information	ce, divorce settlement, property	settlement
		mounts someone owes you les: Unpaid wages, disability insurance payments, disability benefits, sick pay, benefits; unpaid loans you made to someone else	vacation pay, workers' compen	sation, Social Security
	☐ Yes.	Give specific information		
		s in insurance policies es: Health, disability, or life insurance; health savings account (HSA); credit, h	nomeowner's, or renter's insuran	ce
		lame the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
	If you a someor	erest in property that is due you from someone who has died re the beneficiary of a living trust, expect proceeds from a life insurance policy has died.	v, or are currently entitled to rece	ive property because
	■ No □ Yes.	Give specific information		
		against third parties, whether or not you have filed a lawsuit or made a cles: Accidents, employment disputes, insurance claims, or rights to sue	lemand for payment	
		Describe each claim		
	Other c	ontingent and unliquidated claims of every nature, including counterclai	ms of the debtor and rights to	set off claims
	☐ Yes.	Describe each claim		
	■ No	ancial assets you did not already list		
	☐ Yes.	Give specific information		
36		ne dollar value of all of your entries from Part 4, including any entries for rt 4. Write that number here	pages you have attached	\$14,800.00
Pa	rt 5: Des	cribe Any Business-Related Property You Own or Have an Interest In. List any real	estate in Part 1.	
_	Do you o	wn or have any legal or equitable interest in any business-related property?		
_	_	o to line 38.		
Pa		cribe Any Farm- and Commercial Fishing-Related Property You Own or Have an In u own or have an interest in farmland, list it in Part 1.	terest In.	
46.	_ `	own or have any legal or equitable interest in any farm- or commercial fi	shing-related property?	
	☐ Yes.	Go to line 47.		

Official Form 106A/B Schedule A/B: Property page 5

Debto	Kasra Behfar		Case number (if known)	19-10355
Part 7	Describe All Property You Own or Have an Interest in That You I	Did Not List Above		
	o you have other property of any kind you did not already list? Examples: Season tickets, country club membership			
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write that	number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$320,000.00
56.	Part 2: Total vehicles, line 5	\$25,000.00		
57.	Part 3: Total personal and household items, line 15	\$5,400.00		
58.	Part 4: Total financial assets, line 36	\$14,800.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$45,200.00	Copy personal property to	stal \$45,200.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$365,200.00

Official Form 106A/B Schedule A/B: Property page 6

Fill in this infor	rmation to identify your	case:		
Debtor 1	Kasra Behfar			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	OF WASHINGTON	
Case number	19-10355			
(if known)				Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

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Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

4	Which set of exemptions are you claiming?	Chaoli ana anhi	area if rear an area	a ia filina with	
1.	which set of exemptions are you claiming?	Check one only.	even it vour spous	e is tilina with	VOII.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

	•	• •		
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2016 Lexus GS250 44000 miles	\$25,000.00		\$0.00	Fla. Stat. Ann. § 222.25(1)
Zino nom constant 702. cm			100% of fair market value, up to any applicable statutory limit	
Basic Household Good and Furnishings	\$2,000.00		\$2,000.00	Fla. Stat. Ann. § 222.25(4)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Basic Electronics Line from Schedule A/B: 7.1	\$1,500.00		\$1,200.00	Fla. Stat. Ann. § 222.25(4)
			100% of fair market value, up to any applicable statutory limit	
Basic Electronics Line from Schedule A/B: 7.1	\$1,500.00		\$200.00	Fla. Const. art. X, § 4(a)(2)
2.10 110111 2011000010 772. 111			100% of fair market value, up to any applicable statutory limit	
Clothing Line from Schedule A/B: 11.1	\$500.00		\$500.00	Fla. Const. art. X, § 4(a)(2)
Elito II oli II			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Debtor	r 1 K a	asra Behfar			Case number (if known)	19-10355
		cription of the property and line on A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	ewelry	/ n Schedule A/B: 12.1	\$500.00		\$500.00	Fla. Const. art. X, § 4(a)(2)
					100% of fair market value, up to any applicable statutory limit	
_	ash	n Schedule A/B: 16.1	\$500.00		\$500.00	Fla. Stat. Ann. § 222.25(4)
	ne non	Tochedule AVB. 10.1			100% of fair market value, up to any applicable statutory limit	
		ng/Savings: Wells Fargo	\$300.00		\$300.00	Fla. Stat. Ann. § 222.25(4)
Li	ne non	T Scriedule AVB. 17.1			100% of fair market value, up to any applicable statutory limit	
		nent: Federal Government	\$6,000.00		\$6,000.00	Fla. Stat. Ann. § 222.21(2)
	110 11011	Todicadie A.B. ZIII			100% of fair market value, up to any applicable statutory limit	
		n Templeton	\$4,000.00		\$4,000.00	Fla. Stat. Ann. § 222.22
	ne non	1 Schedule A/B. E4.1			100% of fair market value, up to any applicable statutory limit	
		claiming a homestead exemptior to adjustment on 4/01/19 and every			led on or after the date of adjustmen	t.)
_		. Did you acquire the property cove	red by the exemption wi	ithin 1	,215 days before you filed this case?)
_		No			,	
		Yes				

Fill in this information to identify you	ur case:			
Debtor 1 Kasra Behfar				
First Name	Middle Name Last Name		-	
Debtor 2				
(Spouse if, filing) First Name	Middle Name Last Name			
United States Bankruptcy Court for the	: WESTERN DISTRICT OF WASHINGTON			
, ,			-	
Case number 19-10355				
(if known)			_	if this is an
			ameno	led filing
Official Form 106D				
	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			
Schedule D: Creditors	S Who Have Claims Secure	ed by Propert	<u>y </u>	12/15
	If two married people are filing together, both are out, number the entries, and attach it to this form.			
number (if known).				
1. Do any creditors have claims secured b	y your property?			
☐ No. Check this box and submit t	his form to the court with your other schedules.	You have nothing else t	to report on this form.	
Yes. Fill in all of the information	below.			
Part 1: List All Secured Claims				
	more than one secured claim, list the creditor separate	Column A	Column B	Column C
	s a particular claim, list the other creditors in Part 2. As		Value of collateral	Unsecured
much as possible, list the claims in alphabeti	ical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Azita Behfar	Describe the property that secures the claim:	\$40,000.00	\$320,000.00	\$5,451.00
Creditor's Name	2425 San Pietro Circle Palm Beach			
	Gardens, FL 33410 Palm Beach			
	County			
	Rental Property			
1609 NE Hawthorne St	As of the date you file, the claim is: Check all that apply.			
Issaquah, WA 98029	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
W	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		secured		
Debtor 2 only				
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number			
2.2 Bank of America NA	Describe the property that secures the claim:	\$241,301.00	\$320,000.00	\$0.00
Creditor's Name	2425 San Pietro Circle Palm Beach			
	Gardens, FL 33410 Palm Beach County			
DO D	Rental Property			
PO Box 26012 NC41050314	As of the date you file, the claim is: Check all that			
Greensboro, NC 27420	apply. □ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
rumber, etreet, erry, etate a zip eede	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only	■ An agreement you made (such as mortgage or s	secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
■ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

Debtor 1 Kasra Behfar First Name Middle N		Case number (if known)	19-10355	
First Name ivildule is	Name Last Name			
Date debt was incurred	Last 4 digits of account number 7517			
2.3 Bank of America NA	Describe the property that secures the claim:	\$44,150.00	\$320,000.00	\$0.00
Creditor's Name	2425 San Pietro Circle Palm Beach Gardens, FL 33410 Palm Beach County			
PO Box 26012	Rental Property			
NC41050314 Greensboro, NC 27420	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	■ An agreement you made (such as mortgage or sec	cured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number 9009			
2.4 Lexus Financial Services	Describe the property that secures the claim:	\$26,618.00	\$25,000.00	\$1,618.00
Creditor's Name	2016 Lexus GS250 44000 miles			
PO Box 4102	As of the date you file, the claim is: Check all that			
Carol Stream, IL 60197-4102	apply.			
	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
What are the dale to the	☐ Disputed			
Who owes the debt? Check one	Nature of lien. Check all that apply			
_	Nature of lien. Check all that apply.	nura d		
Debtor 1 only	■ An agreement you made (such as mortgage or sec	cured		
■ Debtor 1 only □ Debtor 2 only	 An agreement you made (such as mortgage or sec car loan) 	cured		
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	 An agreement you made (such as mortgage or sector loan) Statutory lien (such as tax lien, mechanic's lien) 	cured		
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	 An agreement you made (such as mortgage or sec car loan) 	cured		
Who owes the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt Date debt was incurred	 ■ An agreement you made (such as mortgage or sector loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit 	cured		
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt □ Date debt was incurred	 An agreement you made (such as mortgage or sector loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) Last 4 digits of account number 7596			
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt □ Date debt was incurred □ Add the dollar value of your entries in C	■ An agreement you made (such as mortgage or sec car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) Last 4 digits of account number 7596	\$352,069		
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt Date debt was incurred	■ An agreement you made (such as mortgage or sec car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) Last 4 digits of account number 7596			

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 2

Filli	in this information to identify your cas	se:				
Deb	tor 1 Kasra Behfar					
	First Name	Middle Name	Last Name			
	tor 2 use if, filing) First Name	Middle Name	Last Name			
	· · · · · · · · · · · · · · · · · · ·					
Unite	ed States Bankruptcy Court for the:	VESTERN DISTRICT (JF WASHINGTON			
	e number 19-10355					
(if kno	own)				_	if this is an led filing
					amend	ed lilling
Offi	icial Form 106E/F					
Scł	nedule E/F: Creditors Who	o Have Unsecu	ured Claims			12/15
Sched left. A	dule G: Executory Contracts and Unexpired dule D: Creditors Who Have Claims Secure attach the Continuation Page to this page. It and case number (if known). List All of Your PRIORITY Unser	d by Property. If more sp f you have no informatio	pace is needed, copy the F	Part you need, fill it out,	number the entries in	n the boxes on the
	Do any creditors have priority unsecured c					
_	☐ No. Go to Part 2.	G				
-	Yes.					
i F F	List all of your priority unsecured claims. If dentify what type of claim it is. If a claim has b possible, list the claims in alphabetical order a Part 1. If more than one creditor holds a partic (For an explanation of each type of claim, see	oth priority and nonpriority ccording to the creditor's r ular claim, list the other cre	amounts, list that claim her name. If you have more than editors in Part 3.	re and show both priority and two priority unsecured cl	and nonpriority amount	ts. As much as
2.1	Azita Behfar	Last 4 digits o	f account number	\$18,000.00	\$18,000.00	\$0.00
	Priority Creditor's Name 1609 NE Hawthorne St Issaquah, WA 98029	When was the	debt incurred?		-	
	Number Street City State Zlp Code	As of the date	you file, the claim is: Chec	ck all that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated	t			
	Debtor 2 only	☐ Disputed				
	Debtor 1 and Debtor 2 only	Type of PRIOR	RITY unsecured claim:			
	lacksquare At least one of the debtors and another	■ Domestic su	upport obligations			
	\square Check if this claim is for a community		certain other debts you owe	•		
	Is the claim subject to offset?	☐ Claims for d	leath or personal injury while	e you were intoxicated		
	No	Other. Spec	ify			
	Yes					
Part	2: List All of Your NONPRIORITY U	Insecured Claims				
3. [Do any creditors have nonpriority unsecure	ed claims against you?				
I	\square No. You have nothing to report in this part.	Submit this form to the co	ourt with your other schedule	9S.		
I	Yes.					
t t	List all of your nonpriority unsecured claim unsecured claim, list the creditor separately fo than one creditor holds a particular claim, list t Part 2.	r each claim. For each clai	im listed, identify what type of	of claim it is. Do not list cla	aims already included	in Part 1. If more

Total claim

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 9

• •		A
American Express Nonpriority Creditor's Name	Last 4 digits of account number 5008	\$8
PO Box 360001	When was the debt incurred? - 1/19	
Fort Lauderdale, FL 33336-0001		
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that yo	u did not
s the claim subject to offset?	report as priority claims	
No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
☐Yes	Other. Specify Credit card purchases	
AMtrust North America	Last 4 digits of account number 8122	\$1
Ionpriority Creditor's Name		
800 Superior Ave E Cleveland, OH 44114	When was the debt incurred? - 1/19	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Vho incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	<u> </u>	
<u>_</u>	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community lebt	☐ Obligations arising out of a separation agreement or divorce that yo	ı did not
s the claim subject to offset?	report as priority claims	a did fiot
No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Insurance	
Bank of America NA	Last 4 digits of account number 3334	\$60
Nonpriority Creditor's Name	- Last 4 digits of account flumber	Ψ00
PO Box 26012 NC41050314	When was the debt incurred? 1/19	
Greensboro, NC 27420	_	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt	lacksquare Obligations arising out of a separation agreement or divorce that yo	ı did not
s the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 9

Debtor	1 Kasra Behfar		Case number (if known) 19-10355	
4.4	Bank of America NA Nonpriority Creditor's Name	Last 4 digits of account number	6340	\$19,845.00
	PO Box 26012 NC41050314	When was the debt incurred?	- 1/19	
	Greensboro, NC 27420 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	_	П		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	l claim:	
	At least one of the debtors and another	Student loans	i Claiiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit card	= :	
4.5	Bank of America NA	Last 4 digits of account number	7355	\$17,776.00
	Nonpriority Creditor's Name PO Box 26012 NC41050314	When was the debt incurred?	- 1/19	
	Greensboro, NC 27420 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	
4.6	BMW Financial Services Nonpriority Creditor's Name	Last 4 digits of account number	4090	\$7,696.89
	5550 Britton Parkway Hilliard, OH 43026-7456	When was the debt incurred?	- 1/19	
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	,	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Car Loan		

Schedule E/F: Creditors Who Have Unsecured Claims

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Best Case Bankruptcy

Kasra Behfar	Case no	Imber (if known) 19-10355
Capital One NA	Last 4 digits of account number 1204	\$7,97
Nonpriority Creditor's Name PO Box 5253 Carol Stream. IL 60197	When was the debt incurred? 1/19)
Number Streat City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check	all that apply
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation ag report as priority claims	reement or divorce that you did not
■ No	☐ Debts to pension or profit-sharing plans,	and other similar debts
☐ Yes	■ Other. Specify Credit card purch	ases
CitiBank	Last 4 digits of account number 2467	\$1,56
Nonpriority Creditor's Name PO Box 6241	When was the debt incurred? - 1/19	
Sioux Falls, SD 57117 Number Street City State Zlp Code	As of the date you file, the claim is: Check	all that apply
Who incurred the debt? Check one.	7.0 0. 1.10 4410 904 11.0, 11.0 0.41111 10.1 0.11001	an that apply
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation ag report as priority claims	reement or divorce that you did not
■ No	Debts to pension or profit-sharing plans, a	and other similar debts
Yes	Other. Specify Credit card purch	ases
CitiBank	Last 4 digits of account number 6947	\$1,42
Nonpriority Creditor's Name PO Box 6241 Sioux Falls, SD 57117	When was the debt incurred? 1/19)
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check	all that apply
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation ag	reement or divorce that you did not
Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharing plans, a	and other similar debts
	- Debie to periolon or profit-straining plans, i	and other allilliar debig

Schedule E/F: Creditors Who Have Unsecured Claims

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1 Kasra Behfar		Case number (if known) 19-10355	
CitiBank	Last 4 digits of account number	4464	\$7,181.04
Nonpriority Creditor's Name PO Box 6241	When was the debt incurred?	- 1/19	
Sioux Falls, SD 57117 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Credit card	purchases	
CitiBank	Last 4 digits of account number	5720	\$1,222.32
Nonpriority Creditor's Name PO Box 6241 Sioux Falls, SD 57117	When was the debt incurred?	- 1/19	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?		ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other Specify Credit card	purchases	
Discover Bank	Last 4 digits of account number	1973	\$12,508.95
Nonpriority Creditor's Name PO Box 29033	When was the debt incurred?	- 1/19	
Phoenix, AZ 85038-9033 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
_			
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed	Lalaine	
At least one of the debtors and another	Type of NONPRIORITY unsecured	ı cıaım:	
☐ Check if this claim is for a community debt	☐ Student loans		
Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
_	<u>-</u> ' '	g plans, and other similar debts	
■ No	Lebis to perision of profit-sharif	g plans, and other similar debts	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor '	Kasra Behfar		Case number (if known) 19-10355	
٠ ١	GE Appliances	Last 4 digits of account number	5375	\$219.55
	Nonpriority Creditor's Name PO Box 644805 Pittsburgh, PA 15264-4805	When was the debt incurred?	- 1/19	
_	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	1 claim:	
	At least one of the debtors and another	Student loans	i Ciaiiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other Specify Personal L	pan	
4	Shell	Last 4 digits of account number	8363	\$422.00
	Nonpriority Creditor's Name Processing Center PO Box 183018 Columbus, OH 43218	When was the debt incurred?	- 1/19	
_	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	□ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit card	purchases	
9	Synchrony Bank	Last 4 digits of account number	0005	\$2,321.06
	Nonpriority Creditor's Name PO Box 965004 Orlando, FL 32896-5004	When was the debt incurred?	- 1/19	
_	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	• •	
	Yes	Other. Specify Credit card	purchases	

Schedule E/F: Creditors Who Have Unsecured Claims

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Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes City Set his page only if you have others to be notified about your bankruptcy, is trying to collect from you for a debt you owe to someone else, list the ori have more than one creditor for any of the debts that you listed in Parts 1 onotified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 Line 4.5 of (Check one) Last 4 digits of account recommendations.	
PO Box 790408 Saint Louis, MO 63179 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Check one. Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? No Check offset? Check one Check if this claim is for a community debt Is the claim subject to offset? Check one is community debt of the claim subject to offset? No Check one Check if this claim is for a community debt Check one Check if this claim is for a community debt Check one Check if this claim is for a community Check one Check one Check one Contingent C	
Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 only Disputed Type of NONPRIO Debtor 1 only Debto	ou file, the claim is: Check all that apply
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Student loans Is the claim subject to offset? No Debts to pension Yes Cothers to Be Notified About a Debt That You Already Student loans Other. Specify List Others to Be Notified About a Debt That You Already Student loans Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Student loans Cother. Specify Part 3: List Others to Be Notified About a Debt That You Already Student loans Cother. Specify Other. Specify Cother. Specify Cother. Specify Cother. Specify List Others to Be Notified About a Debt That You Already Student loans Cother Specify Cother. Specify Cother. Specify List Others to Be Notified About a Debt That You Already Student loans Cother Specify Cother. Specify Cother. Specify Cother. Specify Cother. Specify List Others to Be Notified About a Debt That You Already Student loans Cother Specify Cother. Specify Cother	ou me, the chain is. Oneck all that apply
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debts to pension □ Yes □ Other. Specify Part 3: List Others to Be Notified About a Debt That You Already is trying to collect from you for a debt you owe to someone else, list the ori have more than one creditor for any of the debts that you listed in Parts 1 or ontified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 Line 4.5 of (Check one) Name and Address On which entry in Part 1 Line 4.13 of (Check one) Name and Address On which entry in Part 1 Line 4.13 of (Check one)	
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debts to pension □ Yes □ Other. Specify Part 3: List Others to Be Notified About a Debt That You Already is trying to collect from you for a debt you owe to someone else, list the ori have more than one creditor for any of the debts that you listed in Parts 1 or ontified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 Line 4.5 of (Check one) Name and Address On which entry in Part 1 Line 4.13 of (Check one) Name and Address On which entry in Part 1 Line 4.13 of (Check one)	
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations aris report as priority claim is for a potential of the claim subject to offset? □ No □ Yes □ Other. Specify List Others to Be Notified About a Debt That You Already is Use this page only if you have others to be notified about your bankruptcy, is trying to collect from you for a debt you owe to someone else, list the orinave more than one creditor for any of the debts that you listed in Parts 1 onotified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 Line 4.5 of (Check one) Name and Address On which entry in Part 1 Line 4.13 of (Check one)	
□ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations aris report as priority claim is the claim subject to offset? □ No □ Debts to pension □ Yes □ Other. Specify Other. Specify	
□ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debts to pension □ Yes □ Other. Specify Part 3: List Others to Be Notified About a Debt That You Already 5. Use this page only if you have others to be notified about your bankruptcy, is trying to collect from you for a debt you owe to someone else, list the ori have more than one creditor for any of the debts that you listed in Parts 1 or notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 Line 4.5 of (Check one) Name and Address On which entry in Part 1 Last 4 digits of account results and Address On which entry in Part 1 Last 4 digits of account results and Address On which entry in Part 1 Line 4.13 of (Check one)	ORITY unsecured claim:
debt	
Part 3: List Others to Be Notified About a Debt That You Already 5. Use this page only if you have others to be notified about your bankruptcy, is trying to collect from you for a debt you owe to someone else, list the ori have more than one creditor for any of the debts that you listed in Parts 1 onotified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 Line 4.5 of (Check one) Thousand Oaks, CA 91360-3983 Last 4 digits of account row which entry in Part 1 Last 4 digits of account row which entry in Part 1 Line 4.13 of (Check one)	ising out of a separation agreement or divorce that you did not claims
List Others to Be Notified About a Debt That You Already 5. Use this page only if you have others to be notified about your bankruptcy, is trying to collect from you for a debt you owe to someone else, list the ori have more than one creditor for any of the debts that you listed in Parts 1 or notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 Line 4.5 of (Check one) Suite 100 Thousand Oaks, CA 91360-3983 Last 4 digits of account results of the control	ion or profit-sharing plans, and other similar debts
is. Use this page only if you have others to be notified about your bankruptcy, is trying to collect from you for a debt you owe to someone else, list the ori have more than one creditor for any of the debts that you listed in Parts 1 or notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 Line 4.5 of (Check one) Thousand Oaks, CA 91360-3983 Last 4 digits of account row which entry in Part 1 Last 4 digits of account row which entry in Part 1 Line 4.13 of (Check one)	Credit card purchases
is trying to collect from you for a debt you owe to someone else, list the ori have more than one creditor for any of the debts that you listed in Parts 1 or notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 Line 4.5 of (Check one) 555 St Charles Dr Suite 100 Thousand Oaks, CA 91360-3983 Last 4 digits of account results of the control of the contro	/ Listed
ARSI 555 St Charles Dr Suite 100 Thousand Oaks, CA 91360-3983 Name and Address Caine & Weiner Line 4.5 of (Check one) Last 4 digits of account r On which entry in Part 1 Line 4.13 of (Check one)	r, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency riginal creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you or 2, list the additional creditors here. If you do not have additional persons to be
555 St Charles Dr Suite 100 Thousand Oaks, CA 91360-3983 Last 4 digits of account r Name and Address On which entry in Part 1 Caine & Weiner Line 4.13 of (Check one	1 or Part 2 did you list the original creditor?
Suite 100 Thousand Oaks, CA 91360-3983 Last 4 digits of account r Name and Address On which entry in Part 1 Caine & Weiner Line 4.13 of (Check one	•
Thousand Oaks, CA 91360-3983 Last 4 digits of account r Name and Address On which entry in Part 1 Caine & Weiner Line 4.13 of (Check one	Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address On which entry in Part 1 Caine & Weiner Line 4.13 of (Check one	
Caine & Weiner Line 4.13 of (Check one	number
(1 or Part 2 did you list the original creditor?
21210 214111 00	
Woodland Hills, CA 91367	■ Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account r	number
Name and Address On which entry in Part 1	1 or Part 2 did you list the original creditor?
Client Services Line 4.15 of (Check one	•
3451 Harry S Truman Blvd Saint Charles, MO 63301-4047	Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account r	number
Name and Address On which entry in Part 1	1 or Part 2 did you list the original creditor?
Credit Control Line <u>4.3</u> of (Check one)	e): Part 1: Creditors with Priority Unsecured Claims
PO Box 546 Hazelwood, MO 63042	Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account r	number
Name and Address On which entry in Part 1	1 or Part 2 did you list the original creditor?
Credit Control Line 4.4 of (Check one)	e): Part 1: Creditors with Priority Unsecured Claims
PO Box 546 Hazelwood, MO 63042	■ Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account r	number
•	1 or Part 2 did you list the original creditor?
First Source Advandage Line 4.1 of (Check one) 205 Bryant Woods	, — · · · · · · · · · · · · · · · · · ·
Amherst, NY 14228	■ Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account r	number
· · · · · · · · · · · · · · · · · · ·	1 or Part 2 did you list the original creditor?
Mercantile Line 4.3 of (Check one)	, e
165 Lawrence Bell Dr Suite 100	e):
Buffalo, NY 14221-7900	, e
Last 4 digits of account r	Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims

Schedule E/F: Creditors Who Have Unsecured Claims

Page 7 of 9

Debtor 1 Kasra Behfar	Case number (if known) 19-10355	
Name and Address Midland Credit Management PO Box 60578 Los Angeles, CA 90060-0578	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one):	
Name and Address Nationwide Credit, Inc. PO Box 26314 Lehigh Valley, PA 18002-6314	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.1 of (Check one):	
Name and Address Portfolio Recovery 287 Independence Virginia Beach, VA 23462	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.9 of (Check one):	
Name and Address Portfolio Recovery 287 Independence Virginia Beach, VA 23462	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.10 of (Check one):	
Name and Address Portfolio Recovery 287 Independence Virginia Beach, VA 23462	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.11 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number	
Name and Address Radius PO Box 390848 Minneapolis, MN 55439	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.16 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number	
Name and Address Suttell & Hammer PS PO Box C- 90006 Bellevue, WA 98009-9006	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.12 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number	
Name and Address Vital Recovery Services PO Box 923747 Norcross, GA 30010-3747	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.6 of (Check one):	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 18,000.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 18,000.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 8 of 9

Debtor 1 Kasra Behfar Case number (if known) 19-10355

6i. **Other.** Add all other nonpriority unsecured claims. Write that amount here.

6j. **Total Nonpriority.** Add lines 6f through 6i.

^{6i.} \$ 155,929.69

6j. \$ **155,929.69**

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Fill in this infor	mation to identify your			
Debtor 1	Kasra Behfar			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT	OF WASHINGTON	
_	19-10355			
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the r, Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.4	Oity		Olalo	Zii Codo	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

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Fill in th	is information to identify your	case:			
Debtor 1	Kasra Behfar First Name	Middle Name	Last Name		
Debtor 2 (Spouse if,		Middle Name	Last Name		
United S	tates Bankruptcy Court for the:	WESTERN DISTRICT OF	WASHINGTON		
Case nu (if known)	mber <u>19-10355</u>				☐ Check if this is an amended filing
	al Form 106H dule H: Your Cod	ebtors			12/15
people a fill it out,		ally responsible for supplyi boxes on the left. Attach th	ing correct information	on. If more space is n	ate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
1. D	o you have any codebtors? (If	you are filing a joint case, do	not list either spouse a	as a codebtor.	
□ N ■ Y					
	ithin the last 8 years, have you ona, California, Idaho, Louisiana,				
_	o. Go to line 3. es. Did your spouse, former spou	use, or legal equivalent live w	ith you at the time?		
	■ No □ Yes.				
	In which community state	e or territory did you live?	-NONE-	Fill in the name a	nd current address of that person.
	Name of your spouse, former spouse, Number, Street, City, State & Zip				
in liı Forr	ne 2 again as a codebtor only i	f that person is a guarantor	or cosigner. Make si	ure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Zl	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1	Azita Behfar 1609 NE Hawthorne St Issaquah, WA 98029			■ Schedule D, li □ Schedule E/F □ Schedule G _ Bank of Americ	, line

Fill	in this information to identify your ca	ase:							
Deb	otor 1 Kasra Behfa	r			_				
	otor 2 use, if filing)								
Uni	ted States Bankruptcy Court for the	: WESTERN DISTRICT	T OF WASHINGTON		_				
1	se number 19-10355		_			Check if this is:			
(If kn	nown)					☐ An amende	•		
_							ent showing postpetitions of the following date		
O	fficial Form 106I					MM / DD/ Y	YYY		
S	chedule I: Your Inc	ome						12/15	
spoi atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	r spouse is not filing w	ith you, do not includ	e infori	mation	about your spo	ouse. If more space is	s needed,	
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non-filing spouse	е	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed			☐ Emple	☐ Employed		
		Employment status	☐ Not employed			☐ Not e	mployed		
	employers.	Occupation	Doctor						
	Include part-time, seasonal, or self-employed work.	Employer's name	VA						
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Par	t 2: Give Details About Mor	nthly Income							
	mate monthly income as of the dause unless you are separated.	ate you file this form. If	you have nothing to re	port for	any lin	e, write \$0 in the	space. Include your n	on-filing	
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all e	employ	ers for that perso	on on the lines below. I	f you need	
					F	For Debtor 1	For Debtor 2 or non-filing spouse		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$_	12,915.28	\$ N/A	<u>\</u>	
3.	Estimate and list monthly overt	ime pay.		3.	+\$_	0.00	+\$ N/A	<u>\</u>	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$_	12,915.28	\$N/A		

							For	Debtor 1			For Debto		
	_						_				non-filing	•	
	Copy	/ line 4 here			4		\$	12,91	5.28	- ;	\$	N/	<u>A</u>
5.	List a	all payroll deduc	tions:										
	5a.	Tax, Medicare,	and Social Security de	ductions	5	a.	\$	2,85	0.48	;	\$	N/	Α
	5b.		tributions for retiremer		5	b.	\$		3.28	_	\$	N/	
	5c.	•	ributions for retirement	•	5	c.	\$		0.00	_	\$	N/	
	5d.		ments of retirement fu			d.	\$		0.00	-	\$	N/	
	5e.	Insurance			5	e.	\$		6.66	_	\$	N/	
	5f.	Domestic supp	ort obligations		5	f.	\$		0.00	_	\$	N/	
	5g.	Union dues	J		5	g.	\$		0.00	_	\$	N/	
	5h.	Other deduction	ns. Specify:			h.+	\$		0.00	_	\$	N/	
6.	Add		ctions. Add lines 5a+5b	0+5c+5d+5e+5f+5a+5h.	6		\$	3,97		_	\$	N/	
7.			ily take-home pay. Sub	· ·	7		\$	8,93		-	\$ \$	N/	
8.	8b. 8c.	Net income from profession, or fattach a statemer receipts, ordinar monthly net incollinterest and divide Family support regularly received include alimony,	earm ent for each property and y and necessary busines me. ridends payments that you, a re spousal support, child sproperty settlement.	from operating a business d business showing gross as expenses, and the total non-filing spouse, or a de	8 spendent ce 8	a. b. c.	\$ \$ \$	(0.00 0.00 0.00	- - -	\$ \$	N/ N/ N/	<u>A</u>
	8e.	Social Security	•		_	e.	\$ 		0.00	_	\$	N/	
	8f. 8g.	Include cash ass that you receive,	such as food stamps (b nce Program) or housing	f known) of any non-cash a senefits under the Suppleme	ental 8	f. g.	\$		0.00	_	\$	N// N//	
	8h.		income. Specify:			9. h.+	· —		0.00	_	·	N/	
	011.	Other monthly					<u>_</u>		J.00	- ' '	Ψ	14/	<u>-</u>
9.	Add	all other income.	. Add lines 8a+8b+8c+8	d+8e+8f+8g+8h.	9		\$		0.00		\$	N	/A
10.		•	come. Add line 7 + line 10 for Debtor 1 and Deb	9. tor 2 or non-filing spouse.	10.	\$	8	8,939.86	+ \$		N/A	= \$	8,939.86
11.	Include other	de contributions fr friends or relative ot include any am	om an unmarried partne es.	expenses that you list in S rr, members of your househ In lines 2-10 or amounts tha	old, your dep					-	in <i>Schedu</i>	le J. +\$ _	0.00
12.		that amount on the		0 to the amount in line 11. es and Statistical Summary								\$	8,939.86
13.	Do y∙	ou expect an inc No. Yes. Explain:	rease or decrease with	in the year after you file t	his form?							Comb	oined hly income
	Ц	i es. Expiairi.											

Case number (if known) 19-10355

Debtor 1 Kasra Behfar

Fill	in this information to identify your	case:				
Deb	otor 1 Kasra Behfar			Check	c if this is:	
	Naora Bernar				An amended filing	
	otor 2					ving postpetition chapter
(Spo	ouse, if filing)			1	3 expenses as of	the following date:
Unit	ted States Bankruptcy Court for the:	WESTERN DISTRICT OF WASH	INGTON		MM / DD / YYYY	
	19-10355 nown)					
Of	fficial Form 106J					
So	chedule J: Your E	xpenses				12/15
info	ormation. If more space is need mber (if known). Answer every (
1 ai	Is this a joint case?	ли				
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a □ No	a separate household? ile Official Form 106J-2, Expenses	o for Concrete House	shold of Dobts		
		ile Official Form 1063-2, Expenses	s for Separate House	enola of Debto	or Z.	
2.	Do you have dependents? [□No				
	Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state the					□ No
	dependents names.		Son		10	■ Yes
						□ No
			Son		12	Yes
			Mathan		70	□ No
			Mother		76	■ Yes
			Father		88	□ No ■ Yes
3.	Do your expenses include	■ No	-			
	expenses of people other tha yourself and your dependents	n - U Vas				
exp	imate your expenses as of you	Monthly Expenses r bankruptcy filing date unless y nkruptcy is filed. If this is a supp				
the		n-cash government assistance i nave included it on <i>Schedule I:</i> \			Your expe	enses
4.	The rental or home ownership payments and any rent for the g	p expenses for your residence. I ground or lot.	nclude first mortgage	e 4. \$		3,510.00
	If not included in line 4:					
	4a. Real estate taxes			4a. \$		0.00
	4b. Property, homeowner's, of	or renter's insurance		4b. \$		15.00
	4c. Home maintenance, repa			4c. \$		100.00
_	4d. Homeowner's association			4d. \$		0.00
5.	Additional mortgage payment	ts for your residence , such as ho	me equity loans	5. \$		0.00

Debtor 1	Kasra Behfar	Case numl	ber (if known)	19-10355
6. Utili	ties:			
6a.	Electricity, heat, natural gas	6a.	\$	250.00
6b.	Water, sewer, garbage collection	6b.	\$	170.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	270.00
6d.	Other. Specify:	6d.	\$	0.00
7. Foo	d and housekeeping supplies		\$	1,100.00
3. Chil	dcare and children's education costs	8.	\$	50.00
. Clot	hing, laundry, and dry cleaning	9.	\$	250.00
0. Per	sonal care products and services	10.	\$	50.00
	lical and dental expenses	11.	\$	100.00
	nsportation. Include gas, maintenance, bus or train fare.	12.	\$	450.00
	not include car payments. ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	
			·	100.00
 4. Cha 5. Inst 	ritable contributions and religious donations	14.	\$	0.00
	not include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.	·	0.00
	Vehicle insurance	15c.	\$	150.00
	Other insurance. Specify:	15d.	\$	
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.	130.	Ψ	0.00
Spe		16.	\$	0.00
7. Inst	allment or lease payments:			
17a.	Car payments for Vehicle 1	17a.	\$	582.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
17d.	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report as	18.	\$	1,600.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	10.	·	<u> </u>
	er payments you make to support others who do not live with you.	19.	\$	0.00
Spe	er real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> e		ur Incomo	
	Mortgages on other property	20a.		3,000.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.		0.00
	Maintenance, repair, and upkeep expenses	20d.		
			·	0.00
	Homeowner's association or condominium dues	20e.	\$	330.00
1. Oth	er: Specify: Professional Dues, Continuing Edcuation	21.	+\$	280.00
2. Cal	culate your monthly expenses			
22a.	Add lines 4 through 21.		\$	12,357.00
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	12,357.00
3. Cal	culate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	8,939.86
	Copy your monthly expenses from line 22c above.	23b.	·	12,357.00
				,
23c.	Subtract your monthly expenses from your monthly income.	23c.	\$	-3,417.14
	The result is your <i>monthly net income</i> .	230.	Ψ	0,711117
	you expect an increase or decrease in your expenses within the year after yo example, do you expect to finish paying for your car loan within the year or do you expect your			ase or decrease because of a
	fication to the terms of your mortgage?			

Fill in this inform	ill in this information to identify your case:						
Debtor 1	Kasra Behfar						
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		WESTERN DISTRICT O	OF WASHINGTON				
Case number 1	9-10355						
(if known)	10000			☐ Check if this is an amended filing			

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below							
Di	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?							
	No							
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)						
	Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Kasra Behfar X							
	Kasra Behfar	Signature of Debtor 2						
	Signature of Debtor 1							
	Date February 13, 2019	Date						

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Debt	or 1	Kasra Behfar					
	0	First Name	Middle Name	Last Name			
Debt	or 2 se if, filing)	First Name	Middle Name	Last Name			
.							
Unite	ed States Bar	hkruptcy Court for the:	WESTERN DISTRICT OF	WASHINGTON			
Case (if know		9-10355			_	Check if this is an amended filing	
	icial For tement		Affairs for Indivic	luals Filing for B	ankruptcy	4/16	
inforr	nation. If m		attach a separate sheet to		equally responsible for sup y additional pages, write yo		
Part	1: Give D	etails About Your Ma	arital Status and Where You	Lived Before			
1. V	What is your	current marital statu	ıs?				
[☐ Married						
ı	Not mari	ried					
2. [Ouring the la	ıst 3 years, have you	lived anywhere other than	where you live now?			
Г	□ No						
i		t all of the places you I	ived in the last 3 years. Do no	ot include where you live now	1.		
	Debtor 1 Pri	or Address:	Dates Debtor 1	Debtor 2 Prior Ac	Idress:	Dates Debtor 2	
			lived there	_		lived there	
	5017 NW 1 Pompano	21st Drive Beach, FL 33076	From-To: 2000 - 2017	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:	
	and territorie	es include Arizona, Ca		vada, New Mexico, Puerto R	ity property state or territor ico, Texas, Washington and V		
Part	2 Explain	n the Sources of You	r Income				
F :	Fill in the tota f you are filin	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?	
	□ No ■ Voc Fill	in the details.					
•	Tes. Fili	in the details.					
			Debtor 1	One are impressed	Debtor 2	O	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$11,876.00	☐ Wages, commissions, bonuses, tips		
			☐ Operating a business		☐ Operating a business		

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Official Form 107

Best Case Bankruptcy

page 1

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

paid

still owe

page 2

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Lexus Financial Services PO Box 4102 Carol Stream, IL 60197-4102	Monthly	\$581.00	\$26,618.00	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
	Bank of America NA PO Box 26012 NC41050314 Greensboro, NC 27420	10/15/18	\$1,800.00	\$241,301.00	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
	Bank of America NA PO Box 26012 NC41050314 Greensboro, NC 27420	10/15/18	\$400.00	\$44,150.00	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
7.	Within 1 year before you filed for bankrupter Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. No Yes. List all payments to an insider.	ortners; relatives of any gen control, or owner of 20% o	eral partners; partners of their voting	erships of which yo g securities; and ar	u are a general partner; corporations ny managing agent, including one for
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
8.	Within 1 year before you filed for bankrupte insider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider Insider's Name and Address		ments or transfer a Total amount paid	Amount you	Reason for this payment Include creditor's name
Pa	rt 4: Identify Legal Actions, Repossession	as and Foreclosures	paid	Still Owe	include creditor's name
Par 9.	Within 1 year before you filed for bankruptuctist all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title	cy, were you a party in an		on suits, paternity a	
	Case number Discover Bank v. Debtor 19CIV0037KCX	Collection	King County D 516 3rd Ave Rm. E340 Seattle, WA 98		■ Pending □ On appeal □ Concluded

Case number (if known) 19-10355

Official Form 107

7.

8.

9.

Debtor 1 Kasra Behfar

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

Del	btor 1 Kasra Behfar		Case number	(if known) 19-10355	
10.	Within 1 year before you filed Check all that apply and fill in t		vas any of your property repossessed, foreclosed	d, garnished, attache	d, seized, or levied?
	No. Go to line 11.				
	☐ Yes. Fill in the information	n below.			
	Creditor Name and Address	Do	escribe the Property	Date	Value of the property
		E	plain what happened		
11.	accounts or refuse to make a		did any creditor, including a bank or financial in e you owed a debt?	stitution, set off any	amounts from your
	NoYes. Fill in the details.				
		_			
	Creditor Name and Address	De	escribe the action the creditor took	Date action was taken	Amount
12.	court-appointed receiver, a c		vas any of your property in the possession of an ner official?	assignee for the ben	efit of creditors, a
	■ No □ Yes				
	L Tes				
Par	rt 5: List Certain Gifts and C	Contributions			
13.	■ No		did you give any gifts with a total value of more t	han \$600 per person	?
	Yes. Fill in the details for	each gift.			
	Gifts with a total value of mo	ore than \$600	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave Address:	the Gift and			
14.	Within 2 years before you file No	ed for bankruptcy,	did you give any gifts or contributions with a total	al value of more than	\$600 to any charity?
	☐ Yes. Fill in the details for	each gift or contribu	tion.		
	Gifts or contributions to chamore than \$600 Charity's Name	arities that total	Describe what you contributed	Dates you contributed	Value
	Address (Number, Street, City, Sta	ate and ZIP Code)			
Par	rt 6: List Certain Losses				
15.	Within 1 year before you filed or gambling?	d for bankruptcy o	r since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,
	■ No □ Yes. Fill in the details.				
	Describe the property you lo	ost and Descri	ribe any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred	Includ	e the amount that insurance has paid. List pending ince claims on line 33 of Schedule A/B: Property.	loss	lost
Par	rt 7: List Certain Payments	or Transfers			
	Within 1 year before you filed consulted about seeking bar	d for bankruptcy, c nkruptcy or prepar	lid you or anyone else acting on your behalf paying a bankruptcy petition? rs, or credit counseling agencies for services require		erty to anyone you
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid		Description and value of any property	Date payment	Amount of
	Address Email or website address Person Who Made the Paym	nent if Not You	transferred	or transfer was made	payment
Offic	cial Form 107		of Financial Affairs for Individuals Filing for Bankruptcy		page 4

Best Case Bankruptcy

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Deb	tor 1	Kasra Behfar		Ca	ase number (<i>if known</i>)	19-10355		
	Addr Emai	on Who Was Paid less il or website address on Who Made the Payment, if Not Yo	transferred	value of any prope		payment ansfer was	Amount of payment	
	1140 Belle	Law Group 00 SE 8th St Suite 235 evue, WA 98004 el@cbglaw.com	Attorney Fees				\$1,700.00	
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.							
	I	No						
	□ Y	es. Fill in the details.						
	Perso Addr	on Who Was Paid ess	Description and transferred	value of any prope		payment ansfer was	Amount of payment	
	. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. \[\sum_{\text{n}} \text{No} \]							
		es. Fill in the details.					Date transfer was	
	Addr		Description and value of property transferred			Describe any property or payments received or debts paid in exchange		
	Person's relationship to you				4044		10/1=	
	5017 Pom	Party 7 NW 121st Drive pano Beach, FL 33076	Home - Short S	oale	approx \$320,00	JU	12/17	
	None	e						
19.	benef	n 10 years before you filed for bankru iciary? (These are often called asset-p.		ny property to a se	lf-settled trust or s	imilar device	of which you are a	
	□ Y	es. Fill in the details.						
	Name	Name of trust Description and value of the property transf			ty transferred		Date Transfer was made	
Par	t 8:	List of Certain Financial Accounts, In	nstruments, Safe Deposi	it Boxes, and Stora	ige Units			
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?							
	Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.							
	Y	es. Fill in the details.						
		e of Financial Institution and ess (Number, Street, City, State and ZIP	Last 4 digits of account number	Type of account instrument	or Date according closed, so moved, or transferred	old, r	Last balance before closing or transfer	
	PO E	Bank of America Box 982238 aso, TX 79998-2238	xxxx-	■ Checking □ Savings □ Money Market □ Brokerage □ Other	6/18		\$0.00	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Kasra Behfar Case number (if known) 19-10355

21.	Do you now have, or did you have within 1 year cash, or other valuables?	before you filed for bankruptcy, a	ny safe deposit box or other deposito	ory for securities,			
	No						
	Yes. Fill in the details.	Whe also had seems to to	Describe the contents	De veu still			
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?						
	No						
	Yes. Fill in the details.	Who also has subad assess	Describe the contents	Da waw atill			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
Par	rt 9: Identify Property You Hold or Control for	Someone Else					
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.						
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value			
Par	rt 10: Give Details About Environmental Inform	ation					
For	the purpose of Part 10, the following definitions	apply:					
•	and purpose of rail to, and renowing domination	чрг.у.					
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	ir, land, soil, surface water, ground					
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	-	law, whether you now own, operate,	or utilize it or used			
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.						
Rep	port all notices, releases, and proceedings that ye	ou know about, regardless of wher	n they occurred.				
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environme	ental law?			
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any release of hazardous material?						
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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26.	Have you been a party in any judicial or a	administrative proceeding under any enviro	onmental law? Include settlements	and orders.					
	■ No								
	Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Part	111: Give Details About Your Business	or Connections to Any Business							
27.	Within 4 years before you filed for bankru	uptcy, did you own a business or have any	of the following connections to an	v business?					
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	□ A partner in a partnership								
	☐ An officer, director, or managing executive of a corporation								
	_	ting or equity securities of a corporation							
	 ■ No. None of the above applies. Go t 								
	_								
	Business Name	fill in the details below for each business. Describe the nature of the business	Employer Identification number	er					
	Address (Number, Street, City, State and ZIP Code)		Do not include Social Security						
	(Number, Street, City, State and 21r Code)	Name of accountant or bookkeeper	Dates business existed						
	Kasra N Behfar, DPM PA	Medical Practice	EIN:						
		Palm Beach Accounting 112 Bent Tree Dr Palm Beach Gardens, FL 33418	From-To 1998-2017						
i	institutions, creditors, or other parties. No Yes. Fill in the details below.	uptcy, did you give a financial statement to	anyone about your business? Incl	ude all financial					
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued							
Part	12: Sign Below								
are tr	rue and correct. I understand that making	Financial Affairs and any attachments, and a false statement, concealing property, o to \$250,000, or imprisonment for up to 20 y	r obtaining money or property by fr						
	Kasra Behfar	Cinnetons of Daluar C							
	sra Behfar nature of Debtor 1	Signature of Debtor 2							
Date	e February 13, 2019	Date							
Did y ■ No	0	ment of Financial Affairs for Individuals Fi	ling for Bankruptcy (Official Form 1	07)?					
	ou pay or agree to pay someone who is	not an attorney to help you fill out bankrup	otcy forms?						
		kruptcy Petition Preparer's Notice, Declaration	n, and Signature (Official Form 119).						
Officia	al Form 107 Stat	ement of Financial Affairs for Individuals Filing	for Bankruptcv	page 7					

Case number (if known) 19-10355

Debtor 1 Kasra Behfar

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				Ī
Fill in this inform	nation to identify your c	ase:		
Debtor 1	Kasra Behfar First Name	Middle Name	Last Name	
Debtor 2	First Name	Middle Nove	LadNess	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	kruptcy Court for the:	WESTERN DISTR	RICT OF WASHINGTON	
Case number 1	9-10355			D Observativity in the
(ii known)				☐ Check if this is an amended filing
1				1
Official For	m 108			
		o for Indiv	iduals Filing Under Chapt	or 7
Statemen	it of intention	1101 IIIdiv	iddais i iiiig Onder Onapt	E
If you are an indiv	vidual filing under chap	ter 7, you must fill	out this form if:	
_	claims secured by you			
	ed personal property ar s form with the court wi		ot expired. you file your bankruptcy petition or by the date s	et for the meeting of creditors.
	er is earlier, unless the		time for cause. You must also send copies to the	
	ople are filing together d date the form.	in a joint case, bot	th are equally responsible for supplying correct i	nformation. Both debtors must
	nd accurate as possibl our name and case num		needed, attach a separate sheet to this form. On	the top of any additional pages,
Part 1: List Yo	ur Creditors Who Have	Secured Claims		
			Craditors Who Have Claims Secured by Bronart	by (Official Form 106D) fill in the
information bel	low.		Creditors Who Have Claims Secured by Propert	
Identify the cre	ditor and the property th	at is collateral	What do you intend to do with the property tha secures a debt?	at Did you claim the property as exempt on Schedule C?
Creditor's Le	exus Financial Service	es	☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	_
Description of	2016 Lexus GS250	44000 miles	Retain the property and enter into a Reaffirmation Agreement.	Yes
property			☐ Retain the property and [explain]:	
securing debt:				_
Part 2: List Yo	ur Unexpired Personal	Property Leases		
in the information	below. Do not list real	estate leases. Une	in Schedule G: Executory Contracts and Unexpir expired leases are leases that are still in effect; the he trustee does not assume it. 11 U.S.C. § 365(p)	he lease period has not yet ended.
Describe vour ur	nexpired personal prop	erty leases		Will the lease be assumed?
	roxpirou percental prop	J. 1, 100000		_
Lessor's name: Description of lease	sed			□ No
Property:				☐ Yes
Lessor's name:				□ No
Description of leas	sed			
Property:				☐ Yes
Lessor's name:				
Official Form 108		Statement of Inf	tention for Individuals Filing Under Chapter 7	page 1

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Best Case Bankruptcy

Debtor 1 Kasra Behfar	Case number (if known) 19-10355
Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention a property that is subject to an unexpired lease.	bout any property of my estate that secures a debt and any personal
X /s/ Kasra Behfar Kasra Behfar Signature of Debtor 1	Signature of Debtor 2
Date February 13, 2019	Date

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Best Case Bankruptcy

United States Bankruptcy Court Western District of Washington

In re	Kasra Behfar	S	Case No.	19-10355			
		Debtor(s)	Chapter	7			
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR D	EBTOR(S)			
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(bompensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy,	or agreed to be paid	d to me, for services			
	For legal services, I have agreed to accept			1,700.00			
	Prior to the filing of this statement I have received		\$	1,700.00			
	Balance Due		\$	0.00			
2. T	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3. T	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4. I	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.						
[☐ I have agreed to share the above-disclosed compensat copy of the agreement, together with a list of the name				y law firm. A		
5. I	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
b c	Analysis of the debtor's financial situation, and rendering. Preparation and filing of any petition, schedules, stater Representation of the debtor at the meeting of creditors. [Other provisions as needed] Negotiations with secured creditors to representation agreements and application 522(f)(2)(A) for avoidance of liens on house	arings thereof;	d filing of				
6. E	By agreement with the debtor(s), the above-disclosed fee of Representation of the debtors in any discussion any other adversary proceeding.			ces, relief from s	tay actions or		
		CERTIFICATION					
I this ba	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for	payment to me for	representation of th	ne debtor(s) in		
	ebruary 13, 2019	/s/ Darrel B. Carte	er				
Da	ate	Darrel B. Carter Signature of Attorne	ev.				
		CBG Law Group	•				
		11400 SE 8th St \$ Bellevue, WA 980					
		(425) 283-0432 F	ax: (425) 283-556	60			
		darrel@cbglaw.c	om				
		Name of law firm					